Image# 10991030110 07/28#20/150 17:14

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

To be used by Ferson's (Other than Fontical Committees) including Quantied Nonprofit Co	orporations
1. (a) Name of Individual, Organization or Corporation	
COMMON SENSE ISSUES INC	
(b) Address (number and street)	
(c) City, State and ZIP Code	
CINCINNATI OH 45255	3. FEC Identification Number
	C C90009739
2. Corporate filers only Is the filer a qualified nonprofit corporation? X Yes No	
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	Notice
July 15 Quarterly Report	
October Quarterly Report	
☐ January 31 Year-End Report	
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \textbf{X} \)	
5. COVERING PERIOD: FROM 07 / DD 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
6. TOTAL CONTRIBUTIONS	0.00
7. TOTAL INDEPENDENT EXPENDITURES	3138.99
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or i request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if t reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Patrick Davis	07/28/2010
· 	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report t	to the penalties of 2 U.S.C 43/g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

 $\textbf{A.} \hspace{0.2cm} \textbf{Form/Schedule}: \hspace{0.2cm} \textbf{F5N}$

Transaction ID:

Please note that the independent expenditures disclosed on this report were paid for from general treasury funds and no contributions were made for the purpose of furthering these expenditures.

Image# 10991030112 SCHEDULE 5-E

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ME OF FILER (In Full)			FOR LINE 7 FOR FORM 5
OMMON SENSE ISSUES INC			
Full Name (Last, First, Middle Initial) of Payee ccAdvertising			Date
Mailing Address 13800 Coppermine Rd, Suite 300			Amount / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Herndon	State VA	Zip Code 20171	212.00
Purpose of Expenditure		Category/	Office Sought: X House State: KS
Call Campaign - Voter Education		Type	House
Name of Federal Candidate Supported or Opp WINK HARTMAN	posed by Expenditure:	!	Check One: Support X Oppose
Octobro Versi To Data Box Florifor			Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought		806.17	2010 Cther (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
ccAdvertising			M M / D D / Y Y Y O D D / 26 2010
Mailing Address 13800 Coppermine Rd, Suite 300			Amount
City Herndon	State VA	Zip Code 20171	141.66
Purpose of Expenditure		Category/	Office Sought: X House State: KS
Call Campaign - Voter Education		Type	House Senate District: 01
Name of Federal Candidate Supported or Opp JAMES A BARNETT	posed by Expenditure:	•	President President X Oppose
Calendar Year-To-Date Per Election for Office Sought		947.83	Disbursement For: X Primary General 2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee ccAdvertising			Date M M / D D / Y Y Y
Mailing Address 13800 Coppermine Rd, Suite 300			M M 7 / D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Herndon	State VA	Zip Code 20171	141.66
Purpose of Expenditure Call Campaign - Voter Education		Category/ Type	Office Sought: X House State: KS House Senate
Name of Federal Candidate Supported or Opp TRACEY ROBERT MANN	posed by Expenditure:		Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought		1089.49	Disbursement For: X Primary General 2010 Other (specify)
a) SUBTOTAL of Itemized Independent Expe	enditures		495.32
b) SUBTOTALof Unitemized Independent Ex	xpenditures		
c) TOTAL Independent Expenditures(carry total from last page forward			

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	4 / 5
FOR LI	NE 7 FOR FORM 5

NAME OF FILER (In Full)

Full Name (Last, First, Middle Initial) of Payee		Date
ccAdvertising		M M / D D / Y Y Y
Mailing Address		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
13800 Coppermine Rd, Suite 300		Amount
City State	e Zip Code	141.67
Herndon VA	20171	
Purpose of Expenditure	Category/	Office Sought: X House State: KS
Call Campaign - Voter Education	Type	House
Name of Federal Candidate Supported or Opposed by Expend	diture:	President District: 01
TIMOTHY A HUELSKAMP		Check One: X Support Oppose
Oderder Vers To Bate Ber Florier		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	1231.16	2010 — July Cother (specify)
Full Name (Last, First, Middle Initial) of Payee ccAdvertising		Date
<u> </u>		0 7 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 13800 Coppermine Rd, Suite 300		Amount
	7: 0 1	212.00
City State Herndon VA	e Zip Code 20171	
Purpose of Expenditure		Office Sought: V House Court KS
Call Campaign - Voter Education	Category/ Type	State: NO
Name of Federal Candidate Supported or Opposed by Expend		House Senate District: 04
JEAN KURTIS SCHODORF	ulure.	Check One: Support X Oppose
Calendar Year-To-Date Per Election	1443.16	2010
for Office Sought	1440.10	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Design 4 Marketing and Communications		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		
106 N Collins St		Amount
City State		763.33
Plant City FL	22563	
Purpose of Expenditure	Category/	Office Sought: X House State: KS
Radio Ad - Production	Type	House Senate District: 04
Name of Federal Candidate Supported or Opposed by Expend	diture:	President President
JEAN KURTIS SCHODORF		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	70073.33	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		1117.00
(b) SUBTOTALof Unitemized Independent Expenditures		
(a) TOTAL lada conduct Force "		
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		
, ,		

Image# 10991030114

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5/5	
FOR LINE 7 FOR FORM	VI 5

NAME OF FILER (In Full)

COMMON	SENSE	ISSUES	INC

Full Name (Last, First, Middle Initial) of Payee		Date
Design 4 Marketing and Communications		M M / D D / Y Y Y
Mailing Address		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
106 N Collins St		Amount
City State	e Zip Code	763.33
City State Plant City FL	22563	
·		Office Occupies
Purpose of Expenditure	Category/	Office Sought: X House State: KS
Radio Ad - Production	Type	House Senate District: 04
Name of Federal Candidate Supported or Opposed by Expen	diture:	President
WINK HARTMAN		Check One: Support X Oppose
		Disbursement For: X Primary General
Calendar Year-To-Date Per Election	70836.66	
for Office Sought		Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Design 4 Marketing and Communications		M M / D D / Y Y Y
Mailing Address		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
106 N Collins St		Amount
City State	e Zip Code	763.34
Plant City FL	22563	
Purpose of Expenditure		Office Sought: Y House Communication KS
Radio Ad - Production	Category/ Type	State: 100
		House Senate District: 04
Name of Federal Candidate Supported or Opposed by Expen MICHAEL RICHARD POMPEO	diture:	President States:
WIIGHAEL NICHAND FOWEEO		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	71600.00	2010 Other (specify)
(a) CURTOTAL of Itamizad Indonesiant Funanditures		1526.67
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) CURTOTAL of Unitomized Independent Expanditures		
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		3138.99
(carry total from last page forward to Line 7)		
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